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Bib Data Sheet

CONFIRMATION NO. 1546

SERIAL NUMBER 10/061,698	FILING DATE 01/31/2002 RULE	CLASS 705	GROUP ART UNIT 3621	ATTORNEY DOCKET NO. 112740-536
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APPLICANTS

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** CONTINUING DATA *****

** FOREIGN APPLICATIONS *****

GERMANY 101 045 41.7 02/01/2001

verified, BB

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

** 04/10/2002

Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no	STATE OR	SHEETS	TOTAL	INDEPENDENT
35 USC 119 (a-d) conditions met <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance	COUNTRY	DRAWING	CLAIMS	CLAIMS
Verified and Acknowledged <i>Behrang Radin</i> Examiner's Signature Initials	GERMANY	3	12	3

ADDRESS

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TITLE

Method and apparatus for performing a cashless payment transaction

FILING FEE RECEIVED 1000	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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